

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	
First Named Inventor	Thomas G. Lang
<b>COMPLETE IF KNOWN</b>	
Application Number	09 / 852,616
Filing Date	05/11/2001
Group Art Unit	3617
Examiner Name	A. Vasudeva

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Low-Drag Hydrodynamic Surfaces

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 05/11/2001

as United States Application Number or PCT International

Application Number 09/852,616 and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address belowName **JAMES C. Wray**Address **1493 Chain Bridge Road**Address **Suite 300**City **McLean**State **VA**ZIP **22101**Country **US**Telephone **(703) 442-6800**Fax **(703) 448-7397**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the use of such means are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☐ A petition has been filed for this unsigned inventorGiven Name **Thomas G.**Family Name or Surname **Lang**Inventor's Signature *Thomas G. Lang*Date **10-16-03**Residence: City **Salina Beach**State **CA**Country **US**Citizenship **US**Mailing Address **417 Loma Larga Drive**

Mailing Address

City **Salina Beach**State **CA**ZIP **92075**Country **US****NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventorGiven Name **James T.**Family Name or Surname **Lang**Inventor's Signature *James T. Lang*Date **10-16-03**Residence: City **Palo Alto**State **CA**Country **US**Citizenship **US**Mailing Address **539 Homer Avenue**

Mailing Address

City **Palo Alto**State **CA**ZIP **94301**Country **US**☐ Additional inventors are being named on the \_\_\_\_\_ supplement(s). Additional inventor(s) sheet(s) PTO/USPSA attached hereto.



## Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the  
Patent and Trademark Office

TO: Examiner A. Vasudeva Fax: (703) 308-3519

on October 17, 2003  
Date



Signature

Julie H. Gamotis

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Letter and substitute Declaration (4 total pp)